MONROE TOWNSHIP 2828 STATE ROUTE 222 BETHEL, OHIO 45106

Main phone: 734-6462 (M-F)

RE-OCCUPANCY APPLICATION APPLICATION FEE \$75.00

Please make checks/money orders payable to Monroe Township

NAME OF PROPERTY OWNER					
ADDRESS OF PROPERTY					
CITY	STATE	ZIP	PHONE		
APPLICANT NAM	E(IF DIFFERENT)_				
ADDRESS OF API	PLICANT				
CITY	STATE	ZIP	PHONE		
DESCRIPTION O	FBUSINESS				
HOURS OF OPER	ATION				
			YES(IF YES		
AVAILABLE SEA	TING: INSIDE	OUT	SIDE		
DATE OF OPENI	NG(APPROXIMATEI	LY)			
WILL A LIQUOR	LICENSE BE REQU	IRED? YES	NO		
NAME OF EMER	GENCY CONTACT F	PERSON			
PHONE: DAYTIM	TE.	NIGHT	TTIME		

****YOU WILL BE REQUIRED TO OBTAIN AN INSPECTION FOR THE BUILDING AND PREMISES BY THE MONROE TOWNSHIP FIRE DEPARTMENT BEFORE YOUR PERMIT WILL BE ISSUED. PLEASE EMAIL LT. KYLE SCALES @KSCALES@MONROETWP-OH.GOV TO SCHEDULE YOUR INSPECTION.

It is understood and agreed by the applicant that any error, misstatement or omission in the application for issuance of this permit may cause the permit to be revoked after issuance.

Applicant's Signa	iture	Date
*****	********	******
TOWNSHIP AP	PROVAL: APPROVED BY:	
DENIED BY:	REAS	ON:
DATE	PERMIT NUMBER	